

SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one) PAGE 65690 / 66173

<input checked="" type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26	<input type="checkbox"/>	27a
	27b		28a		28b		28c		29

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial)

A. DEPARTMENT OF TREASURY

Mailing Address 1500 PENNSYLVANIA AVENUE, NW			Date of Disbursement <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>02</td><td></td><td></td><td>20</td><td></td><td></td><td>2019</td><td></td><td></td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	02			20			2019			
M	M	/	D	D	/	Y	Y	Y	Y														
02			20			2019																	
City WASHINGTON		State DC	Zip Code 20220																				
Purpose of Disbursement TRAVEL EXPENSES			<input type="checkbox"/>																				
Candidate Name			Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼																						
State: District:																							

Full Name (Last, First, Middle Initial)			Date of Disbursement <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>02</td><td></td><td></td><td>25</td><td></td><td></td><td>2019</td><td></td><td></td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	02			25			2019			
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State: District:																							

Subtotal Of Receipts This Page (optional)..... →

444509.19

Total This Period (last page this line number only)..... →

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SCHEDULE B-P

ITEMIZED DISBURSEMENTS

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Detailed Summary Page

FOR LINE NUMBER:
(check only one) PAGE 65691 / 66173

<input checked="" type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26	<input type="checkbox"/>	27a
	27b		28a		28b		28c		29

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M	M	/	D	D	/	Y	Y	Y	Y														
02			28			2019																	
City WASHINGTON		State DC	Zip Code 20220																				
Purpose of Disbursement TRAVEL EXPENSES			<input type="text"/>																				
Candidate Name			Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼																						
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M	M	/	D	D	/	Y	Y	Y	Y														
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M	M	/	D	D	/	Y	Y	Y	Y														
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State: District:																							

Subtotal Of Receipts This Page (optional).....
→ 101810.01

Total This Period (last page this line number only).....
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SCHEDULE B-P ITEMIZED DISBURSEMENTS

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DONALD J. TRUMP FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial)

A. DEPARTMENT OF TREASURY

Mailing Address 1500 PENNSYLVANIA AVENUE, NW

City WASHINGTON	State DC	Zip Code 20220
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Purpose of Disbursement
TRAVEL EXPENSES

Candidate Name



Category/
Type

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
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State: District:

Full Name (Last, First, Middle Initial)

B. DIRECT TRAVEL

Mailing Address 7430 E CALEY AVE
#220

City CENTENNIAL	State CO	Zip Code 80111
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Purpose of Disbursement
REIMBURSEMENT [SB23.4496]: TRAVEL: AIR

Candidate Name



Category/
Type

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
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State: District:

Full Name (Last, First, Middle Initial)

c. DIRECT TRAVEL

Mailing Address 7430 E CALEY AVE
#220

City CENTENNIAL	State CO	Zip Code 80111
--------------------	-------------	-------------------

Purpose of Disbursement
REIMBURSEMENT [SB23.4496]: TRAVEL: AIR

Candidate Name



Category/
Type

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
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State: District:

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

Date of Disbursement

M M 03	/	D D 14	/	Y Y Y Y Y 2019
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FEC Identification Number

C

Transaction ID : SB23.4280

Amount of Each Disbursement this Period

91945.01

Memo Item

Date of Disbursement

M M 03	/	D D 09	/	Y Y Y Y Y 2019
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FEC Identification Number

C

Transaction ID : SB23.5108

Amount of Each Disbursement this Period

882.99

Memo Item

Date of Disbursement

M M 03	/	D D 09	/	Y Y Y Y Y 2019
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FEC Identification Number

C

Transaction ID : SB23.5109

Amount of Each Disbursement this Period

988.00

Memo Item